



"MISSION OF THE MONTH" NOMINATION FORM

Please complete this form, have it cleared by your Mission Director and forward it to your bureau correspondent.

Name of Mission: _____ Number of Staff _____

Signature of Mission Director _____

Mission's innovative or creative initiative. Please present in a challenge/solution format:

Challenge (50-100 words): _____

Innovative Solution (150-200 words): _____

Primary point of contact on this initiative: _____

Were there USAID funds saved by initiative? _____ Explain: _____

Was there any positive media attention generated? _____ Please explain and attach or send any articles, if possible _____

Can the initiative be replicated elsewhere? _____

Did the Ambassador recognize this initiative? _____

Number of photos included _____

Caption for each photo: _____
